Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Part J General Informa Name of organization	tion	
Nome of		· · · · · · · · · · · · · · · · · · ·
Name of organization		
Friends of S	am Nixon	Employer identification num
Mailing address (P.O. Box or	number, street, and room	or suite number) 54 1998070
7412 Barkbri City or town, state, and ZIP	dge Road	••••••••••••••••••••••••••••••••••••••
Chesterfield E-mail address of organization	<u>, VA 23832</u>	
gthomson@goo	m dmanco com	
Name of custodian of record		Ab. Contradiction
	·	4b Custodian's address
Gary Thomson		131 Temple Lake Drive, Ste. 1
/ *********************************		Colonial Heights, VA 23834
Name of contact person	5	6b Contact person's address
() to the a (11) and a		Same as 4b
Gary Thomson	İ	
Project		
ousiness address or organizal	don (if different from mailing	address shown above). Number, street, and room or suite number
City or town, state, and ZIP c	SAME	
only or sports state, and zir co	ode .	
it II Purpose		
Describe the purpose of the o	rganization	
		of Delegates
List of All Relate	d Entities (see instruc	tions)
t III List of All Relate	d Entities (see instruc	
t III List of All Relate Name of related entity	d Entities (see instruc	tions)
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Name of related entity NONE	d Entities (see instruc	tions)
It III List of All Relate Name of related entity NONE	d Entities (see instruc	tions)
None None	d Entities (see instruc	tions)
Name of related entity NONE	d Entities (see instruc	tions)
None None	d Entities (see instruc 8b Relationship	tions)



t IV List of All Office	96 Tide	Compensated Employees (see instructions) 9c Address	-
Name	79 1.02		_
		Same as 2	
Sam Nixon	Candidate		
			_
		Same as 4b	
Cary Thomson	Treasurer		
		1	

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Under penalties of perju	ry, I declare that the organization nam	ned in Part I is to be treated as an organization described in section 527 of accompanying schedules and statements, and to the best of my knowledge	the and
It is true, correct and co	omplete.	,	
ı V	ampiete.	7/22/62/	

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